

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> | | Docket Number (Optional) 5219 - 061243 | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------|--|---------|------------|-------------------------|--|--|-------|------|----|---|-------|-------|----|--|--------|-------|---------|--|--------|-------|----|--|--------|--------|----|
| Application Number 10/686,697 For "Polymers, Methods of Use Thereof, and Methods of Decomposition Thereof" | | Filed 10/16/2003 | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit 1795 | | Examiner Sin J. Lee | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1110</td> <td style="text-align: center;">\$555</td> <td style="text-align: center;">\$ 1110</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1730</td> <td style="text-align: center;">\$865</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2350</td> <td style="text-align: center;">\$1175</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23-0650</u>.</p> | | | | <u>Fee</u> | <u>Small Entity Fee</u> | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ | <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ 1110 | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ 1110 | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ | | | | | | | | | | | | | | | | | | | | | | | |

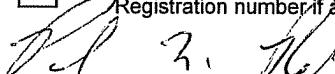
WARNING: Information on this form may become public. Credit card information should not be included on this form.
Provide credit card information and authorization on PTO-2038.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

attorney or agent of record. Registration Number 33,059

attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____



Signature

Date

Paul M. Reznick

412-471-8815

Typed or printed name

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2009

Complete if Known

| | | |
|--|----------------------|-----------------|
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | Application Number | 10/686,697 |
| | Filing Date | 10/16/2003 |
| | First Named Inventor | Paul A. Kohl |
| | Examiner Name | Sin J. Lee |
| | Art Unit | 1795 |
| TOTAL AMOUNT OF PAYMENT | (\$) 1110.00 | Attorney Docket |
| | | 5219 - 061243 |

METHOD OF PAYMENT (check all that apply)

| | | | | |
|---|---|--------------------------------------|-------------------------------|---|
| <input type="checkbox"/> Check | <input checked="" type="checkbox"/> Credit Card | <input type="checkbox"/> Money Order | <input type="checkbox"/> None | <input type="checkbox"/> Other (please identify): _____ |
| <input checked="" type="checkbox"/> Deposit Account | Deposit Account Number: | 23-0650 | Deposit Account Name: | _____ |

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

| | |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|-------------------------|---------------------|-----------------|---------------------|-----------------|-------------------------|-----------------|-----------------------|
| | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | |
| Utility | 330 | 82 | 540 | 270 | 220 | 110 | _____ |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | _____ |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | _____ |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | _____ |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity

Fee (\$) **Fee (\$)**

52 26

Each independent claim over 3 (including Reissues)

220 110

Multiple dependent claims

390 195

| Total Claims | - 20 or HP | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|---------------------|-------------------|---------------------|-----------------|----------------------|--------------------------------------|
| _____ | _____ | _____ | _____ | _____ | Fee (\$) Fee Paid (\$) |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | - 3 or HP | Extra Claims | Fee (\$) | Fee Paid (\$) |
|----------------------|------------------|---------------------|-----------------|----------------------|
| _____ | _____ | _____ | _____ | _____ |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|---------------------|---------------------|---|-----------------------|----------------------|
| _____ | _____ | _____ / 50 = _____ (round up to a whole number) | _____ x _____ = _____ | _____ |

4. OTHER FEE(S)

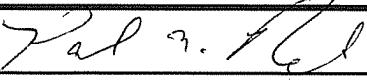
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Three month Extension of Time

Fees Paid (\$)

\$1110.00

SUBMITTED BY

| | | | | | |
|-------------------|---|--------------------------------------|-------|-----------|---------------|
| Signature |  | Registration No. (Attorney/Agent) | 33059 | Telephone | 412-471-8815 |
| Name (Print/Type) | Paul M. Reznick | | | Date | April 1, 2009 |